FORM

PA-35

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

ASSESSING OFFICIALS' RESPONSE TO EXEMPTIONS/ TAX CREDITS/DEFERRAL APPLICATION

NOTE: "CU PARTNER" STANDS FOR "CIVIL UNION PARTNER"

Property for which Exemption/Tax Credit/Deferral is claimed: PROPERTY OWNER'S LAST NAME STEP 1 FIRST NAME INITIAL NAME AND PROPERTY OWNER'S LAST NAME FIRST NAME PROPERTY OWNER'S NAME **ADDRESS** MAILING ADDRESS CITY/TOWN ZIP CODE PROPERTY ADDRESS FOR WHICH EXEMPTION/CREDIT/DEFERRAL IS CLAIMED CITY/TOWN TAX MAP # LOT# STEP 2 BLOCK # EXEMP-**VETERANS' TAX CREDIT** Granted/Denied Date TIONS/ TAX Veterans' Tax Credit \$50 minimum (to \$500) Amount \$ CRED-Service Connected Total & Permanent Disability \$700 minimum to \$2000 Amount \$ ITS/ Surviving Spouse/CU Partner of Veteran Who Was Killed or Who Died on Active Duty \$700 minimum (to \$2000) Amount \$ **DEFER-RAL** Review Discharge Papers (ei: Form DD214), Form # _ Other Information **VETERANS' EXEMPTION** Granted Denied **Date Total Exemption** (a) Veteran (b) Surviving Spouse/CU Partner APPLICABLE ELDERLY AND DISABLED EXEMPTION (OPTIONAL) INCOME AND ASSET LIMITS PROPERTY OWNER'S NAME Disabled Exemption **Elderly Exemption** Elderly Exemption Per Age Category Income Limits \$ Single \$ 65 - 74 years of age \$ Married \$ 75 - 79 years of age \$ 80 + years of age \$ **Asset Limits** \$ Single Married \$ \$ OTHER EXEMPTIONS Granted Denied **Date** Amount \$ _____ **Elderly Exemption** Disabled Exemption Amount \$ _____ Improvements to Assist the Deaf Amount \$ Improvements to Assist Persons with Disabilities Amount \$ Blind Exemption Amount \$ _____ **Deaf Exemption** Amount \$ _____ Amount \$ ____ Solar Energy Systems Exemption TAX MAP/BLOCK/LOT Amount \$ _____ Woodheating Energy Systems Exemption Wind-Powered Energy Systems Exemption Amount \$ **Elderly & Disabled Tax Deferral** Granted Denied Amount \$ Elderly and Disabled Tax Deferral For Deferrals: This page must be returned to the property owner after approval or denial on or before July 1st *following* the date of Notice of Tax under RSA 72:1-d by first class mail. (RSA 72:34,IV) STEP 3 Municipal Comments/Notes COM-MENTS/ NOTES Selectmen/Assessor(s) Printed Name Signature of Selectmen/Assessor(s) in ink Date STEP 4 SIGNA-**TURES** If an application for a property tax exemption or tax credit is denied, an applicant may appeal in writing on or before **September 1st** following the date of notice of tax under RSA 72:1-d to the New Hampshire Board of Tax and Land Appeals (BTLA) or to the Superior Court. Example: If you were denied an exemption from your 2013 property taxes, you have until September 1, 2014, to appeal. Forms for appealing to the BTLA may be obtained from the NH BTLA, 107 Pleasant Street, Concord, NH 03301, their web site at www.nh.gov/btla or by calling (603) 271-2578. Be sure to specify **EXEMPTION APPEAL**. **APPEAL** PROCE-**DURE**



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LINE-BY-LINE INSTRUCTIONS

STEP 1 NAME & ADDRESS	Please type or print the property owner(s) name and address in the spaces provided. Also, enter the Property address, Tax Map, Block and Lot numbers of the property for which the Exemption/ Tax Credit/Deferral is claimed.
STEP 2 CREDITS/ EXEMPTIONS/ DEFERRAL	Check the Credits/Exemptions/Deferral box(s) which apply to property listed above. Check the box(s) Granted or Denied which apply. Place the amount of Exemption/Credit/Deferral which was granted or denied. Place the date the Exemption/Credit/Deferral was granted or denied. For those exemptions having income or asset limitations, the assessing officials may request true copies of any documents as needed to verify eligibility. All documents and copies of such documents submitted by the applicant shall be returned to the applicant after a decision is made on the application.
STEP 3 COMMENTS/ NOTES	Optional space to place any notes or comments which the applicant should be made aware of.
STEP 4 SIGNATURES	Selectmen or Assessor must print and sign their name in ink and date the form.